DECLARATION AND POWER OF ATTORNEY

for, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the

EMULS		TION PROCESS FO METHOD FOR USIN		COATING COMPOSITION	NS, POWDER COATING
describe Check o	ed and claimed in t	he specification:		· 	-
	*a. at b. Since file I hereby state that				ification, including the claims,
applicat	, Code of Federal	Regulations, §1.56. Ved States provisional	Under Title 35, U.S. Code	known to me to be materia §119, the priority benefits or my legal representatives	
•					
foreign	States of America of priority application I hereby appoint	either (a) more than on (s) and/or United State the following as my	one year prior to this applicates provisional application attempts of record with fi	n(s):	in countries foreign to the ng date of the above-named
applicat	ion and to transact	all business in the Pa	atent Office:		
•	Kevin R Nola Ma James A	F. Chapuran Kepner ae McBain Oliff	Reg. No. 31,342; Reg. No. 26,402; Reg. No. 32,145; Reg. No. 35,782; Reg. No. 27,075;	Elizabeth F. Harasek Eugene O. Palazzo Mario A. Costantino Joel S. Armstrong Christopher W. Brown	
	Kirk M. Thomas Edward	P. Berridge Hudson J. Pardini P. Walker A. Miller	Reg. No. 30,024; Reg. No. 27,562; Reg. No. 30,411; Reg. No. 31,450; Reg. No. 32,771;	Richard E. Rice Paul Tsou Eric D. Morehouse	Reg. No. 31,560; Reg. No. 37,956; and Reg. No. 38,565.
of my or statement	I hereby declare wn knowledge are nts were made with ment, or both, un	that I have reviewed true and that all state the knowledge that der Section 1001 of	and understand the conter ements made on information willful false statements ar		hat all statements made herein be true; and further that these shable by fine or
1	Typewritten Full of First or Sole I		Guerino		CACDIDANTE
	oj Pilsi di Bole I	nventor	Given Name	G. Middle Initi	SACRIPANTE al Family Name
2	**INVENTOR'S SIGNATURE:		Lucin	Sonporto	ar ranning ivanile
3	**DATE OF SIGNATURE:		Flhrung	06	2004
	Residence:	Oakv	Month	Day Ontario	Year Canada
		Cit		State or Province	Country
	Citizenship:	Canada	•		·
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		mailing address,			

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

Page 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

<i>1</i> ·	Typewritten Fu	ıll Name		•			
	of Second Joint Inventor (if any)		Hadi	K.	MAHABADI		
		•	Given Name	Middle Initial	Family Name		
2 .	**INVENTOF	R'S SIGNATURE:	4.65.	X			
3	**DATE OF SIGNATURE:		(02)	V 3 0 6	2004		
3	DATE OF SIGNATURE.		Month	Day	Year		
	D - 11	Mississauga	Ontario	-	Canada		
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		mailing address,	137-231 Queen St. Bouti				
		including country)	Mississauga, Ontario CANADA L5M 1L7				
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•	**DATE OF SIGNATURE:		E bruan	10	2004		
3			Month	Day	Year		
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	Citizenship:	Canada			· · · · · · · · · · · · · · · · · · ·		
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1	Typewritten Full Name of Fourth Joint Inventor (if any) **INVENTOR'S SIGNATURE:		-				
			Dan	Α	HAYS		
			Given Name	Middle Initial	Family Name		
2			Nan A	. Hays			
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	Citizenship.	Post Office Address:					
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	including country)		Fairport, New York 1445				
1	Typewritten Full Name			_	w.a. =		
	of Fifth Joint Inventor (if any)		Kip	L. Middle Initial	JUGLE		
			Given Name	/ Miladie Initial	Family Name		
2	**INVENTOR'S SIGNATURE:		149 84	egx	z004		
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	Citizenship:	United States					
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		including country)	Diodilliela, New 101K	Bloomfield, New York 14469			

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.